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Debtor 1	Tosha N Simmon	c		
3.55334(.)/	First Name	Middle Name	Last Name	
Debtor 2		2020/2007/2000		
Spouse if, filling)	First Name	Midale Name	Last Name	
Inited States Ba	nkruptcy Court for the:	DISTRICT OF NEW JERSEY		
Case number ·	19-16143			
if known)				Check if this is an amended filing
Official Form	106Doo			
		and and the state of the	L4	T ₁ =
Declarat	ion About a	ın Individual De		
Declarat two married pe ou must file this btaining money	ion About a ople are filing together s form whenever you fi	r, both are equally responsible le bankruptcy schedules or am a connection with a bankruptcy	or supplying correct inform	
two married pe ou must file this btaining money ears, or both. 18	ople are filing together form whenever you fill for property by fraud in	r, both are equally responsible le bankruptcy schedules or am a connection with a bankruptcy	or supplying correct inform	nation.
Declarat two married pe ou must file this btaining money ears, or both. 18	ion About a cople are filing together s form whenever you fill or property by fraud in 3 U.S.C. §§ 152, 1341, 1	r, both are equally responsible le bankruptcy schedules or am a connection with a bankruptcy	or supplying correct inform ended schedules, Making a case can result in fines up	nation. false statement, concealing property, or to \$250,000, or imprisonment for up to 20
Declarat two married pe ou must file this btaining money ears, or both. 18	ion About a cople are filing together s form whenever you fill or property by fraud in 3 U.S.C. §§ 152, 1341, 1	r, both are equally responsible le bankruptcy schedules or am connection with a bankruptcy 519, and 3571.	or supplying correct inform ended schedules, Making a case can result in fines up	nation. false statement, concealing property, or to \$250,000, or imprisonment for up to 20

Signature of Debtor 2

Date

X /s/ Tosha N Simmons

Tosha N Simmons Signature of Debtor 1

Date November 15, 2021

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Fi	I in this information to identify your c	ase:			SHAN					
De	btor 1 Tosha N Sin	nmons								
	obtor 2 ouse, if filing)									
Ur	ited States Bankruptcy Court for the	DISTRICT OF NEW .	JERSEY							
	se number 19-16143					Check i	f this is:			
(11)	nown)					■ An a	amende	d filling		
									g postpetition	chapter
C	fficial Form 106I					7	/ DD/ Y		norm g state	
S	chedule I: Your Inc	ome				1811-01	7 007	TEL		12/15
spo	oplying correct information, If you buse. If you are separated and you ich a separate sheet to this form. The separate sheet to this form.	r spouse is not filing w	ith you, do not inclu	de infor	matio	about ye	our spo	use. If mo	re space is r	needed.
THE CO.										
đ,	information.		Debtor 1			D	ebtor 2	or non-fil	ing spouse	
	If you have more than one job,	Employment status	Employed			E] Emplo	yed		
	attach a separate page with information about additional employers.	Employment status	□ Not employed				☐ Not employed			
		Occupation	Site director							
	Include part-time, seasonal, or self-employed work.	Employer's name	Alphabest Educ	cation,	Inc.					
	Occupation may include student or homemaker, if it applies.	Employer's address	5980 Kinney Ro Lewisville, NC							
		How long employed t	here? 5 mont	hs						
Pa	12: Give Details About Mor	nthly Income								
spo	imate monthly income as of the da use unless you are separated.		5.76 J.D. (1884/1962-1911) (1964) (196 8 .27 20.5 (1		- 420 2 -230				1886-00- 3 4892-00-1-715-0	1100 N. C.
	ou or your non-filing spouse have mo e space, attach a separate sheet to		ombine the informatio	n for all	employ	ers for tha	at perso	n on the lir	nes below. If y	ou need
					I	For Debto	or 1		otor 2 or ng spouse	
2.	List monthly gross wages, salar deductions). If not paid monthly, or			2.	s	1,72	26.92	\$	N/A	
3.	Estimate and list monthly overti	me pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross Income. Add lin	ie 2 + line 3.		4.	s	1,726	.92	\$	N/A	

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btor	1	Tosha N Simmons		C	ase number (# //	nown)	19	-16143		
					For Debtor 1			or Debtor	17.000	
C	op	y line 4 here	4,	- 5	5 1,72	6.92	\$		N/A	Ā.
Li	ist	all payroll deductions:								
5:	Э.	Tax, Medicare, and Social Security deductions	5a.	. 3	S 24	7.08	\$		N/A	
5t	ь.	Mandatory contributions for retirement plans	5b.			0.00	\$		N/A	-
50	C.	Voluntary contributions for retirement plans	5c.		0.4	0.00	\$		N/A	
50	d.	Required repayments of retirement fund loans	5d.			0.00	\$		N/A	in the second
5€	Θ.	Insurance	5e.			0.00	\$		N/A	
5f	f.	Domestic support obligations	5f.			0.00	\$		N/A	
59	J.	Union dues	5g.	e i		0.00	\$	3	N/A	
51	٦.	Other deductions. Specify:	5h.	+	\$ 1	0.00	+ \$		N/A	
A	dd	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	3	24	7.08	\$		N/A	
C	alc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	5	1,47	9.84	S		N/A	
Li 8a		all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	3	3 (0.00	5		N/A	
81	5	Interest and dividends	86.			0.00	9 55		N/A	
80	2.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.			0.00	\$		N/A	
80	1.	Unemployment compensation	8d.			0.00	\$		N/A	
86	3.	Social Security	8e.		, the part of the	1.83	\$		N/A	
8f 8g		Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	8f.			0.00	\$		N/A	
81	200	Other monthly income. Specify:	8g. 8h.			0.00			N/A	
Di	i.	Other monthly income, specify,	0().	7	P (0.00	г Ф.		N/A	
A	dd.	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h,	9.	\$	12	1.83	\$		N/	4
			10. \$	\$	1,601.67	+ \$		N/A	= \$	1,601.6
		he entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	-							
Inc ot Do	clu her	e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your friends or relatives. of include any amounts already included in lines 2-10 or amounts that are not a ify:	deper					Schedul	9 J. +\$	0.0
W		the amount in the last column of line 10 to the amount in line 11. The res that amount on the Summary of Schedules and Statistical Summary of Certaines							\$	1,601.6
									Combi	
Do	о у	ou expect an increase or decrease within the year after you file this form."	?						month	y income

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Fill in thi	s information to identify yo	our case:	naid Media Sproke	SMIR TO LOUIS I				
Debtor 5	Tosha N Sim	mons			C	neck i	f this is:	
					100	An	amended filing	
Debtor 2								wing postpetition chapte
(Spouse,	if filing)					13	expenses as of	the following date:
United Sta	ates Bankruptcy Court for the	DISTR	CT OF NEW JERSEY			M	M/DD/YYYY	
Case nun (If known)								
44.40.300.00								
Manager and American	ial Form 106J							
	edule J: Your				etersker er			12
informa		eded, atta ry questio	. If two married people ar ich another sheet to this n.					
1. Is t	his a joint case?							
	No. Go to line 2. Yes. Does Debtor 2 live i	n a conar	ata hausahalda					
1	□ No	n a separ	ate nousehold r					
	20000 m an ann an an an	st file Offici	al Form 106J-2. Expenses	for Separate Househol	d of D	ebtor	2.	
2. Do	you have dependents?	■ No						
	not list Debtor 1 and otor 2.	☐ Yes.	Fill out this information for each dependent	Dependent's relations Debtor 1 or Debtor 2	ship to		Dependent's age	Does dependent live with you?
	not state the endents names.							□ No □ Yes
								□ No
								□ Yes
								□ No
								□ Yes
								□ No □ Yes
. Do	your expenses include	100	No					L1 165
exp	enses of people other the irself and your dependent	nan 🖂	Yes					
Part 2. Estimate	Estimate Your Ongoing	ng Month	y Expenses uptcy filing date unless y y is filed. If this is a supp	ou are using this form	ı as a	supp	lement in a Cha	pter 13 case to report
applicab		ankrupto	y is med. If this is a supp	memental Schedule S,	cneck	the t	oox at the top o	r the form and fill in tr
			government assistance is					
	Form 106I.)					resident .	Your exp	enses
	rental or home owners ments and any rent for the		ses for your residence. It r lot.	nclude first mortgage	4.	\$		300.00
If n	ot included in line 4:							
4a.	Real estate taxes				4a.	\$		0.00
4b.	Property, homeowner's	0.00 PM			4b.			0.00
4c.	Home maintenance, re		Control of the Contro		40.			0.00
4d.	Homeowner's associat		dominium dues our residence, such as ho	mo oquitu lecco	4d.	\$ -		0.00
Add	uuonai mongage nayme	OUTS TOT VO	uir residence, such as ho	THE POSITION MILED SHOW	0.5%			0.00

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Utilities:				
	ctricity, heat, natural gas	6a,	37S	0.00
	ter, sewer, garbage collection	6b.		0.00
6c. Tel	ephone, cell phone, Internet, satellite, and cable services	6c.	\$	75.00
	er. Specify:	6d.	S	0.00
Food and	housekeeping supplies	7.	S	400.00
Childcar	and children's education costs	8.	S	0.00
Clothing	laundry, and dry cleaning	9.	\$	62.00
. Personal	care products and services	10.	\$	62.00
. Medical a	and dental expenses	11.	\$	50.00
	tation. Include gas, maintenance, bus or train fare. clude car payments.	12.	\$	200.00
. Entertain	ment, clubs, recreation, newspapers, magazines, and books	13.	\$	100.00
Charitabl	e contributions and religious donations	14.	\$	50.00
. Insuranc			OVER 1	0.01717
	dude insurance deducted from your pay or included in lines 4 or 20,			
	insurance	15a.		0.00
11000	alth insurance	15b.	100	0.00
	iicle Insurance	15c.	\$	200.00
	er insurance. Specify:	15d.	\$	0.00
Taxes, Dr. Specify:	onot include taxes deducted from your pay or included in lines 4 or 20.	16,	\$	0.00
	nt or lease payments: payments for Vehicle 1	17a.	\$	0.00
	payments for Vehicle 2	17b.		0.00
	er. Specify:	17c.		0.00
	er, Specify:	17d.	3.75.0	0.00
. Your pay	ments of alimony, maintenance, and support that you did not report as from your pay on line 5, Schedule I, Your Income (Official Form 106I).	S		0.00
	ments you make to support others who do not live with you.	• C1 1873/1	S	0.00
Specify:		19.	1970	0.00
Other rea	property expenses not included in lines 4 or 5 of this form or on Sch		ur Income.	
	tgages on other property	20a.		0.00
20b. Rea	il estate taxes	20b.	S	0.00
20c. Pro	perty, homeowner's, or renter's insurance	20c.	S	0.00
20d. Mai	ntenance, repair, and upkeep expenses	20d.	S	0.00
	neowner's association or condominium dues	20e.	S	0.00
. Other: Sp	ecify:	21.	+\$	0.00
	your monthly expenses		•	
	ines 4 through 21.		\$	1,499.00
	line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
	ine 22a and 22b. The result is your monthly expenses.		\$	1,499.00
	your monthly net income.			
	y line 12 (your combined monthly income) from Schedule I.	23a.	A CONTRACTOR OF THE PARTY OF TH	1,601.67
23b. Cop	y your monthly expenses from line 22c above.	23b.	-\$	1,499.00
	tract your monthly expenses from your monthly income.	23c.	S	102.67
	result is your monthly net income.	- 0		102.07
For exampl modification	spect an increase or decrease in your expenses within the year after y e, do you expect to finish paying for your car loan within the year or do you expect you r to the terms of your mortgage?	ou file this ur mortgage p	form? payment to incre	ase or decrease because (
■ No.				
	Explain here:			

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Debtor 1	Tosha N Simmon	S		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, fiting)	First Name	Middle Name	Last Name	
United States I	Bankruptcy Court for the:	DISTRICT OF NEW JER	SEY	
Case number	19-16143			

 Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Par	Summarize Your Assets		
			assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B.	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	34,656.05
	1c. Copy line 63, Total of all property on Schedule A/B	\$	34,656.05
Par	2: Summarize Your Liabilities		
			labilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	23,147.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	2,615.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	143,357.98
	Your total liabilities	\$	169,119.98
Par	3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	1,601.67
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	1,499.00
Part	4 Answer These Questions for Administrative and Statistical Records		
6.	Are you filling for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other so	hedules.
	■ Yes		
7.	What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "Incurred by an individual primarily for a household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a persona	l, family, or
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this the court with your other schedules.	box and s	submit this form to
Offic	cial Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information		page 1 of 2

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Debtor 1 Tosha N Simmons

Case number (if known) 19-16143

 From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

3,206.77

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total	claim
From Part 4 on Schedule E/F, copy the following: 9a. Domestic support obligations (Copy line 6a.)	S	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	2,615.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	135,118.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	137,733.00